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CONFIRMATION NO. 1753

Bib Data Sheet

SERIAL NUMBER 10/707,754	FILING DATE 01/09/2004 RULE	CLASS 257	GROUP ART UNIT 2826	ATTORNEY DOCKET NO. FIS920030312
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## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/15/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	NY	DRAWING 3	CLAIMS 3	CLAIMS 4
Verified and Acknowledged	<i>[Signature]</i> Examiner's Signature	Initials			

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## TITLE

NITRIDED STI LINER OXIDE FOR REDUCED CORNER DEVICE IMPACT ON VERTICAL DEVICE PERFORMANCE

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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